PTO/SB/21 (09-04)

Approved for use through 07/31/2006, OMB 0651-0031 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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3910	Application Number	10/602,761
TRANSMITTAL	Filing Date	June 25, 2003
FORM 0C7 0 4 2005	First Named Inventor	Christina Smith et al.
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Art Unit	3625
(to be used for all correspondence after intitial litting)	Examiner Name	N. Rosen
Total Number of Pages in This Submission	Attorney Docket Number	000482 00002

(to be used for all correspondence aft	Examiner Name		N. Rosen					
Total Number of Pages in This Submission		Attorney Docket No	umber	000482.00	002			
ENCLOSURES (check all that apply)								
Fee Transmittal Form				wance Communication to TC				
Fee Attached	Licensing	Licensing-related Papers			Appeal Communication to Board of Appeals and Interferences			
Amendment / Reply	Petition			Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)				
After Final		Convert to a al Application		Proprietary Information				
Affidavits/declaration(s)		Power of Attorney, Revocation Change of Correspondence Address			Status Letter			
Extension of Time Request	Terminal	☐ Terminal Disclaimer			Other Enclosure(s) (please identify below):			
	Request f	Request for Refund			claimer			
Express Abandonment Request	CD, Numl	ber of CD(s)						
☐ Information Disclosure Statemen	t 🗆 Lar	☐ Landscape Table on CD						
Certified Copy of Priority Document(s)	Remarks							
Reply to Missing Parts/								
Incomplete Application								
Reply to Missing Parts under 37 CFR1.52 or 1.53								
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT								
Firm Banner & Witcoff, LTD.								
Signature fint W. Kadan								
Printed Name	Anthony W. Kandare							
Date	October 4, 2005 Reg. No. 48,830							
CERTIFICATE OF TRANSMISSION/MAILING								
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.								
Signature								
Typed or printed name	Date							

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PTO/SB/17 (12-04v2)
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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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Effective Fees pursuant to the Consolidation	ve on Pare	rations Act. 200	 5 (H.R. 4818).	Complete If Known					
			Application Number 10/602,761						
FEE TRANSMITTAL			Filing Date		June 25, 2003				
for FY 2005			First Named Inventor Christina Smith et a			mith et al.			
Applicant claims small entity status. See 37 CFR 1.27			Examiner Name N. Rosen						
			Art Unit		3625				
TOTAL AMOUNT OF PAY	IMENI	(\$)1,150.00	.=	Attorney Doc	ket No.	000482.000	002		
METHOD OF PAYMENT (check all that apply)									
☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) :									
Deposit Account Dep	osit Acco	unt Number: 19	-0733	Dep	osit Acc	ount Name:_	Banner &	Witcoff	, LTD.
For the above-ide	entified de	posit account, t	he Director is	hereby author	rized to:	(check all the	at apply)		
⊠ Charge fee	e(s) indica	ated below			☐ Cha	rge fee(s) ind	licated below	v, except	for the filing fee
· ·		nal fee(s) or und	erpayments o	of fee(s)	⊠ Cred	dit any overpa	ayments		
Under 37 WARNING: Information on the	CFR 1.16	and 1.17				• •		rovide cro	ndit card
information and authorization			Gredit card II	normation sho	raiu not l	e menueu or	i una ivilli. Pl	Ovide Cle	
FEE CALCULATION									· · · · · · · · · · · · · · · · · · ·
1. BASIC FILING, SEARCH, AND EXAMINATION FEES									
	FILING	FEES		ARCH FEE			MINATION Small		
Application Type	Fee (\$	Small Entig) Fee(\$)			all Entir ee(\$)	<u>ty</u> <u>Fee(</u>			Fees Paid (\$)
Utility	300	150	500		50	200	100		\$
Design	200	100	100		50	130	65		\$
Plant .	200	100	300	0 1	50	160	80		
Reissue	300	150	500	0 2	50	600	300		
Provisional	200	100	(0	0	0	0		
2. EXCESS CLAIM FE	ES								Small Entity
Fee Description							Fe	e (\$)	Fee (\$)
Each claim over 20 (inc							-	50	25
Each independent claim		(including Reis	ssues)					00 50	100 180
Multiple dependent clai Total Claims		Claims	Fee(\$)	Fee Paid	1 (\$)				Dependent Claims
- 20 or HP=	2	X	25=	Fee (\$ FeePaid(\$)					
HP = highest number of t	_	paid for, if greate		 -			_		
Indep. Claims		Claims	Fee(\$)	Fee Paid	d (\$ <u>)</u>		_		_
3 or HP=	· <u>0</u>	x	200 =	00					
HP = highest number of	independe	nt claims paid for,	if greater than	3.					
3. APPLICATION SIZE FEE									
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer									
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets	Extra S	Sheets Nu	ımber of ea	ch addition	al 50 o	r fraction th	nereof <u>Fe</u>	ee (\$)	Fee Paid (\$)
- 100 = / 50 = (round up to a whole number) x 250 = \$							= \$		
						Fees Paid (\$)			
Non-English Specification, \$130 fee (no small entity discount) \$1,150.00									
Other (e.g., late filing surcharge): Terminal Disclaimer Fee (\$130) and Petition for Extension of Time (\$1,020.00)									
- (8., -2									
SUBMITTED BY									

SUBMITTED BY				
Signature	ants Wi Keelan	Registration No. (Attorney/Agent) 48,830	Telephone	202-824-3244
Name (Print/Type)	Anthony W. Kandare		Date	10/4/05